

Final Fireman's Report

(Done During and After the Fire)

1. **Location:** Be sure to completely fill out map on previous page!

2. **Ownership:**

1. National Forest, National Grassland, or Land Utilization Project
2. State and private lands inside Forest Service protection boundary
3. Outside Forest Service protection Boundary
4. Other Federal lands inside Forest Service protection Boundary

3. **Protection:** _____

4. **Final Total Acres:** _____ **Acres on Public Land:** _____ **Acres on Other:** _____

5. **Control Problems?** ☐ No ☐ Yes (specify _____)

6. **Additional Resources Needed?** Make sure to add them to the front page!

7. **Are you within your comfort level?** Yes _____ No _____

8. **Specific Cause (Circle One Number):**

1. Lightning
2. Equipment Use
3. Smoking
4. Campfire
5. Debris Burning
6. Railroad
7. Arson
8. Children
9. Miscellaneous

8. **If man caused, what clues did you find?**

10. **Elevation:** _____

11. **Percent Slope:** _____

12. **Fire Intensity Level:** 0-2 2-4 4-6
6-8 8-12 12+

13. **Spread:** rapid moderate slow

14. **Position on Slope:** top middle bottom

15. **Wind Speed and Direction:** _____

16. **Smoke Color and Volume:** _____

9. **Aspect:**

1. North
2. Northeast
3. East
4. Southeast
5. South
6. Southwest
7. West
8. Northwest
9. Ridge
10. Flat

17. **Fuel model/ Cover Type** (Get this from your Powell Reference Guide): _____ / _____

18. **Initial Suppression Strategy:** Confine Contain Control

19. **Time Fire was Controlled (if applicable):** Date _____ Time _____:

20. **Time Final Suppression Strategy Attained:** Date _____ Time _____:

21. **Time Fire Out (if applicable):** Date _____ Time _____:

22. **Human Life:** 1) Entrapment Situation 2) Reinforce Safety Zones/Escape Routes
3) Other: (Explain _____)

23. **Property:** 1) Primary Res. 2) Seasonal Res. 3) Commercial 4) Outbuilding

Incident Organizer

FIRE NAME: _____ FIRE NUMBER: _____

IC: _____ RADIO CHANNEL USED: _____

LEGAL: TWN _____ RNG _____ SECTION(S) _____ SUBSECTION: _____

LATITUDE: _____ LONGITUDE: _____

DESCRIPTIVE LOCATION OR DIRECTIONS: _____

REPORTED BY: _____

DISPATCHED DATE AND TIME: _____

ESTIMATED SIZE: _____ ACRES OWNERSHIP: _____

RESOURCES ON FIRE

RESOURCE NAME/ID	BRIEFED DATE/TIME	DATE		DATE		DATE	
		TIME ON	TIME OFF	TIME ON	TIME OFF	TIME ON	TIME OFF

ADDITIONAL RESOURCES NEEDED ON FIRE

RESOURCE TYPE	ORDERED DATE	ORDERED TIME	ASSIGNED RESOURCE NAME/ID	RESOURCE ETA	WHEN RESOURCE ARRIVED

Dispatch fills this out.

Fire Size Up at Incident

DATE: _____ TIME: _____ IC: _____ CHANNEL: _____

TWNSHP: _____ RANGE: _____ SECTION: _____ 1/4 SECTION: _____

LAT: _____ LONG: _____

AZIMUTH: _____ SIZE (ACRES): _____ ELEVATION: _____

ASPECT: N NE E SE S SW W NW

SPREAD RATE: fast moderate slow

SLOPE POSITION: top middle bottom

SLOPE %: 0 5 10 15 20 25 30 35 40 45 50

FUEL: duff grass shrub slash ppine dfir lppine spruce sbalpn mixed

FUEL LOADING: light moderate heavy

WIND DIRECTION: N NE E SE S SW W NW

WIND SPEED: 0 3 5 7 10 15 20 25 30 35 40

SMOKE COLOR: blue white gray brown black

SMOKE VOLUME: light moderate heavy

BEHAVIOR: smoldering creeping running run/spot torching crowning torch/spot

FLAME LENGTH: 0-2 2-4 4-6 6-8 8-10 10-12

CAUSE: lightning human equipment miscellaneous

HAZARDS: snags helicopters structures etc.

SPREAD POTENTIAL: none low moderate high extreme

IS LCES IN PLACE? Yes No

DO YOU HAVE ANY "Yes" CHECKED ON YOUR COMPLEXITY ANALYSIS (page 5)?

MAKE SURE TO RECORD ALL RESOURCES THAT ARE ON YOUR FIRE ON THE FRONT PAGE OF THIS ORGANIZER!

Map Sketch
ATTACH MAP (if required)

A blank grid map consisting of a 15x15 square grid. A north arrow is located at the top center, pointing upwards and labeled "NORTH". The grid is used for plotting a route, with a starting point marked by a red dot at the intersection of the 8th column and 14th row from the top-left.

Perimeter in Chains-----average chains=acres 17=1 24=2 29=3 34=4 38=5 45=7 53=10 65=15			SECTION OF MAP: (1 MILE BY 1 MILE) TOWNSHIP: RANGE: SECTION: LAT: LONG:		
STAGING-is located at:		I. C. Post-is located at:			
NOTES: (include roads, creeks, trails, etc.)					
PREPARED BY:		POSITION:		DATE:	
				TIME: 11.	

NARRATIVE: Give a brief description of the session efforts. Include resources committed by number and type. Document any/all major decisions, observations, and problems.

3.

Spot Weather Observation and Forecast Request

1. Name of Incident/Project		2. Control Agency		3. Request Made	
				Time:	Date:
4. Location (Twn, Rng, Sec, 1/4)			5. Drainage Name		6. Exposure/Aspect:
7. Size of Incident/Project:	8. Elevation		9. Fuel Type:		10. Project On:
	Top	Bottom			

11. Weather Conditions at Incident/Project or RAWS:									
Place	Elevation	Obs Time	Wind Direction/Velocity		Temperature		No Entry Necessary		Remarks
			20 Foot	Eye Level	Dry Bulb	Wet Bulb	RH	DP	

The Fire Weather Forecaster will Furnish the Information for Block 13:

Discussion and Outlook:

Burn Period	Sky Cover	Temp	Humidity	Wind		Indices
				Eye Level	20 Foot	
<input type="checkbox"/> Today <input type="checkbox"/> Afternoon <input type="checkbox"/> Evening <input type="checkbox"/> Tonight (Sunset until Sunrise)	<input type="checkbox"/> Mostly Sunny/Clear <input type="checkbox"/> Fair <input type="checkbox"/> Partly Cloudy <input type="checkbox"/> Mostly Cloudy <input type="checkbox"/> Cloudy _____% <input type="checkbox"/> Variable	°F <input type="checkbox"/> High <input type="checkbox"/> Low <input type="checkbox"/> Range	_____% <input type="checkbox"/> Max <input type="checkbox"/> Min <input type="checkbox"/> Range	<input type="checkbox"/> Upslope <input type="checkbox"/> Dwnslope Direction: _____ Velocity: _____ Gusts: _____	<input type="checkbox"/> Upslope <input type="checkbox"/> Dwnslope Direction: _____ Velocity: _____ Gusts: _____	Haines: LAL: ERC:
<input type="checkbox"/> Today <input type="checkbox"/> Afternoon <input type="checkbox"/> Evening <input type="checkbox"/> Tonight (Sunset until Sunrise)	<input type="checkbox"/> Mostly Sunny/Clear <input type="checkbox"/> Fair <input type="checkbox"/> Partly Cloudy <input type="checkbox"/> Mostly Cloudy <input type="checkbox"/> Cloudy _____% <input type="checkbox"/> Variable	°F <input type="checkbox"/> High <input type="checkbox"/> Low <input type="checkbox"/> Range	_____% <input type="checkbox"/> Max <input type="checkbox"/> Min <input type="checkbox"/> Range	<input type="checkbox"/> Upslope <input type="checkbox"/> Dwnslope Direction: _____ Velocity: _____ Gusts: _____	<input type="checkbox"/> Upslope <input type="checkbox"/> Dwnslope Direction: _____ Velocity: _____ Gusts: _____	Haines: LAL: ERC

6. BE ALERT, KEEP CALM, THINK CLEARLY, ACT DECISIVELY.

Plan strategy and tactics – direct/indirect/confine/back off

Trigger Points: Use these to assess your situation.

RH decreasing? Y N Change in wind speed/direction? Y N

Increasing ROS? Y N FL>4ft? Y N Change in topography? Y N

South/West aspect or a change to these aspects? Y N

Spotting/more frequent spotting occurring? Y N

Is it the heat of the day? Y N Are tactics effective? Y N

Are you within your comfort level? Y N

Proceed: ____ Change Tactics: ____ Hold: ____ Disengage: ____

Request assistance of more experienced IC: _____

(CONDITIONS CHANGING? REVISIT COMPLEXITY ANALYSIS)

7. MAINTAIN PROMPT COMMUNICATION WITH YOUR CREW, SUPERVISOR, AND ADJOINING FORCES.

Frequency AND Communication established/verified _____

Frequencies being

used: _____

8. GIVE CLEAR INSTRUCTIONS AND MAKE SURE THEY ARE UNDERSTOOD.

Clear instructions given to all resources: ____ all resources briefed: ____

9. MAINTAIN CONTROL OF YOUR FIREFIGHTERS AT ALL TIMES.

All resources and dispatch know who Incident Commander is

Are you in control? (Span of control)(Revisit 7&8) _____

10. FIGHT FIRE AGGRESSIVELY, BUT PROVIDE FOR SAFETY FIRST

Providing for safety first, engage fire with your initial attack plan, based on data obtained and assessed in items 1-5. Reassess 1-9 continuously. If there is a significant change or you are not sure/comfortable, fall back to #6 and reassess. Identify, recognize, and mitigate the Watch Out situations that apply to your incident.

INITIAL ATTACK FORM / BRIEFING CHECKLIST

(Based on 10 Standard Fire Fighting Orders)

En route to IA fire, IC will transfer information to appropriate blocks below. This Ten Order Form will serve as the basis for briefing incoming resources.

1. KEEP INFORMED OF FIRE WEATHER CONDITIONS AND FORECASTS.

Received today's fire weather forecast: Y N

Forecasted high Temperature: _____ Forecasted low R/H: _____

Forecasted wind: Direction: _____ Speed: _____

Forecasted Changes _____

2. KNOW WHAT YOUR FIRE IS DOING AT ALL TIMES, OBSERVE PERSONALLY, AND USE SCOUTS.

3. BASE ALL ACTIONS ON CURRENT AND EXPECTED BEHAVIOR OF FIRE

Start developing tactics based on info collected in size up. Anticipate changes in fire behavior.

Received Regional Fire Behavior Forecast (Weekly): Y N

Current ERC _____ Haines Index _____ Time of Day _____

Recent Fuel Moisture Indices: 10 hr _____ 100hr _____ 1000hr _____

FUEL TYPE CHANGES: Y N IF YES TO WHAT? _____

TOPOGRAPHY CHANGES: Y N

4. HAVE ESCAPE ROUTES AND SAFETY ZONES FOR EVERYONE AND MAKE THEM KNOWN.

Escape route(s) identified: _____ Safety Zone (s) identified: _____

All personnel briefed on location of ER/SZ: _____

Re-evaluate Safety Zones and Escape Routes as conditions change

5. POST A LOOKOUT WHEN THERE IS POSSIBLE DANGER.

Lookout needed? _____ (Reassess as conditions change)

Pot. Ignition below: Fuel jackpots?

Spotting?

Snags/Widow makers? N/A / AVOIDED / MITIGATED / ELIMINATED

8.

INCIDENT COMPLEXITY ANALYSIS (TYPE 3,4,5) MUST BE DONE BEFORE AND THROUGHOUT THE INCIDENT

1.) **NOT COMPLEX**-Proceed with initial attack

2.) **COMPLEX**-Go through the table below

Fire Behavior	Yes	No
Fuels extremely dry and susceptible to long-range spotting or you are currently experiencing extreme fire behavior		
Weather forecast indicating no significant relief or worsening conditions		
Current or predicted fire behavior dictates indirect control strategy with large amounts of fuel within planned perimeter		
Firefighter Safety	Yes	No
Performance of firefighting resources affected by cumulative fatigue		
Overhead over-extended mentally and/or physically		
Communication ineffective with tactical resources or dispatch		
Organization	Yes	No
Operations are at the limit of span of control		
Incident action plans, briefings, etc. missing or poorly prepared		
Variety of specialized operations, support personnel or equip.		
Unable to properly staff air operations		
Limited local resources available for initial attack		
Heavy commitment of local resources to logistical support		
Existing forces worked 24 hours without success		
Resources unfamiliar with local conditions and tactics		
Values to be Protected	Yes	No
Urban interface; structures, developments, recreational facilities, or potential for evacuation		
Fire burning or threatening more than one jurisdiction and potential for unified command with different or conflicting management objectives		
Unique natural resources, special-designation areas, critical municipal watershed, T&E species habitat, cultural sites		
Sensitive political concerns, media involvement, or controversial fire policy		

3.) *****If you have checked "Yes" on 3 to 5 of the analysis boxes, consider requesting the next appropriate level of incident management support.*****

INCIDENT OBJECTIVES
1. SAFETY of firefighters and public
2.
3.
4.
Your goal is to manage the incident and not create another

5.

Must be done before and during the incident.

FIRE SIZE UP RISK MANAGEMENT PROCESS
MUST BE DONE BEFORE AND THROUGHOUT THE FIRE

Step 1) SITUATION AWARENESS

Gather Information:

- ▶ Objectives
- ▶ Previous Fire Behavior
- ▶ Communications
- ▶ Weather Forecast
- ▶ Who's in Charge
- ▶ Local Factors
- ▶ Scout the Fire

Step 2) HAZARD ASSESSMENT

Estimate Potential Fire Behavior Hazards

- ▶ Look Up, Down, Around Indicators

Identify Tactical Hazards

- ▶ Watch Out Situations

What other safety hazards exist?

Consider severity versus probability

Step 3) HAZARD CONTROL

Fire Orders & LCES Checklist = Mandatory

- ▶ Anchor Point
- ▶ Downhill Checklist (if applicable)

What other controls are necessary?

Step 4) DECISION POINT

Are controls in place for identified hazards?

NO – Re-assess Situation YES – Next Question

Are selected tactics based on expected fire behavior?

NO – Re-assess Situation YES – Next Question

Have instructions been given and understood?

NO – Re-assess Situation YES – Initiate Action

Step 5) EVALUATE

Personnel: Low experience level with local factors?

Distracted from primary tasks?

Fatigue or stress reaction?

Hazardous attitude?

The Situation: What is changing? Are strategy and tactics working?

SAFETY CHECKLIST

- | | | |
|--|------------------------------|-----------------------------|
| L: Has fire been thoroughly scouted and lookouts posted (if necessary)? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| A: Awareness: predicted weather, fire behavior, plan | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| C: Are Communications with dispatch and firefighting personnel adequate? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| E: Have escape routes been identified and understood by all firefighters? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| S: Have safety zones been identified and understood by all firefighters? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

If you answered no to any of the above questions, please explain why _____

AFTER ACTION REVIEW

Things to Remember During the AAR:

- Schedule the AAR shortly after the incident is completed.
- Focus on WHAT not WHO.
- Establish clear ground rules:
 1. encourage candor and openness,
 2. this is dialog – not lecture or debate,
 3. discuss events that went well, and events that should be fixed,
 4. keep all discussions confidential.
- Skilled facilitation is recommended (an individual with less at stake like a staff member outside of the chain of command may need to be present).

What Did We Set Out to Do?

Review the primary objectives and expected action plan.

What Actually Happened?

Identify and Discuss effective and non-effective performance. _____

Identify Barriers that were encountered and how they were handled. _____

Discuss all actions that were not standard operating procedure, or those that presented safety problems. _____

Why did it Happen?

Focus on WHAT, not WHO. _____

What Can We Do Next Time?
